

Good afternoon. My name is Steven Hanks, and I'm the Chief Medical Officer of the Hospital of Central Connecticut, which consists of the former New Britain General Hospital in New Britain and the former Bradley Memorial Hospital in Southington. I'm here in support of the proposed partnership between Hartford Hospital/The Hospital of Central Connecticut and the UCONN Health Center which we feel offers all key stakeholders; the Health Center, The University of Connecticut, the private hospitals in the greater Hartford area, and the citizens of our state an extraordinary opportunity to improve the health care system in our region. Our not for profit hospital is the fifth largest of thirty acute care hospitals in the state in terms of annual discharges, and we are number one or two in emergency department visits depending on which database one utilizes.

As the largest employer in New Britain, we play a significant role as a local business in addition to the critical role we play for the patients we serve, many of whom are either underinsured or uninsured. While roughly double the size of the John Dempsey Hospital, we provide hospital services to two and a half times as many patients within the groups that include Medicaid, SAGA and the uninsured. Much of our higher proportional load of course is due to the patient demographics of our local community and the access we offer through our outpatient medical teaching clinics. This is not something unique to our hospital, but is important to point out, as in the end, we are all the state's public hospitals to one degree or another.

Like all academic medical centers, the University has a tripartite mission of clinical care, education and research. Since inception, the needs of the University and the Medical School have been met through a cooperative venture with surrounding affiliated hospitals to fulfill critical portions of the clinical and teaching realms of the mission. We essentially have a distributed model where the community hospitals have been the classrooms and our physicians the educators of the University's medical students and residents.

Unfortunately, the size but even more so, the physical design and layout of the John Dempsey Hospital has become not only inadequate to fulfill all of the University's teaching and clinical requirements, but its very structure and costs have rendered it financially insolvent as a stand alone entity, dependent on annual eight figure appropriations from Connecticut's taxpayers to keep them whole; this despite enjoying (Medicaid?) reimbursement rates that are higher than those for surrounding hospitals providing the same care and service.

The small size of the Dempsey also makes recruitment of top notch medical faculty to the University all the more difficult, and has left UConn struggling as an average state medical school within a Division One university with a nationally renowned athletics program. Our community of patients realize this, as the same fans who root so fervently for our teams on the hardwood or the gridiron not infrequently choose to seek high level medical care outside our region, in Boston, New York, New Haven, or elsewhere.

So where do we go from here? Everyone agrees that a strong medical school is a crucial regional asset. Everyone agrees that the current physical plants of our region's hospitals, Dempsey included, are in need of significant capital investment. And just about everyone agrees now that existing staffed and licensed bed capacity is sufficient to service inpatient hospital needs in the greater Hartford and central Connecticut region for two to three decades to come.

One option is to use the excuse of financial exigency and do nothing. We do not believe this is an acceptable alternative. Left in its current layout, the Dempsey will continue to suffer ever increasing operational losses and erosion of stature as an academic health center. The result will be the loss of key faculty, an inability to attract top notch physicians, researchers and students, and a chronic need for large cash infusions leading ultimately to eventual closure.

Yet another option would be a slim-downed version of what the University originally proposed, prior to the excellent work that has been presented to you in the form of the CASE report. Such a plan would involve the state investing, independent of any collaboration with the surrounding community hospitals, in a replacement hospital essentially the same size as the current John Dempsey. We do not feel this is a viable option as it would not materially impact the negative operational performance of the Farmington facility and would add nothing of value as it relates to enhancing the stature of the medical school.

We've also heard a third option bantered about, namely, simply closing it down. While you might think this would be an option favored by supposed competitor hospitals like my own, we do not feel this is realistic nor in the best interests of the community or the state, given the number of jobs represented on the hill, the difficulty the surrounding hospitals would have in trying to absorb the scattered hospital volume and the impact this would have on the faculty, many of whom would depart at the notion of such an approach.

This is why we are so excited and supportive of the proposal before you, which we believe is the only way forward that offers the ability to not only maintain but enhance the significant investment the state has already made to the facilities in Farmington and staunch the flow of red ink on operations while simultaneously allowing the University to enhance its reputation in the pantheon of academic medical centers. We believe that the investment required of the state to achieve this vision, though eye-popping given the current state of the economy and the state's budgetary challenges, will provide the greatest short and long term return for the University, the affiliated hospitals, our community of patients and the regional economy. This proposal for a collaborative approach to simultaneously meet the needs of the community, the University, the affiliated hospitals and our local economy, offers a singular opportunity to move us onto the path of competitive advantage.

Thank you,
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Chief Medical Officer of the Hospital of Central Connecticut